REQUEST FOR MEETING NOTIFICATION



CITY OF BEL AIRE

DATE:				
NAME:				
ADDRESS:				
• •		ation of all Regular and ission, Boards, and Com	_	the Bel Aire City
I can be reach	hed at:			
		Daytime Phone:		
		Evening Phone:		
		Fax Number:		
		E-Mail Address:		
Signature:				
Mailing				
Address:				
	City	State	<u>.</u>	Zip

This request expires on December 31st of the year filed.

If you still wish to receive notifications of meetings, another form will have to be filed.

